

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>[Signature]</i>	<i>7/22/99</i>
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	<i>8</i>	<i>7-26-99</i>
FORMALITY REVIEW	<i>[Signature]</i>	<i>[Signature]</i>	<i>8-5-99</i>

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 (Through numeral) Canceled
 - Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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